by the United States Pharmacopoeia Board of Trustees. It was originally provided for use in the Philippines and Puerto Rico and also in Cuba, where it was promptly adopted as the official Pharmacopoeia. It is now also official in Costa Rica, Nicaragua (together with the French Codex), Panama, and the Dominican Republic.

The Board of Trustees, in announcing this new edition to the health departments of the republics of Central and South America have expressed the hope that it may be useful to them in the preparation of their own pharmacopoeias, and that it may assist in bringing about uniformity in titles, strengths, and standards of purity among the medicines used in Pan-American countries.

As it has required considerable time for the translation and printing of the Spanish Edition, alterations and corrections, published in the U. S. P., XI, First Supplement, which became official December 1, 1937, have been incorporated.

The book is now on sale by the distributors, The Business Publishers International Corporation, 330 West Forty-second Street, New York, N. Y.

Concerning the conquest of syphilis and gonorrhea. A statement from Surgeon-General Thomas Parran.

To the Editor: The conquest of syphilis and gonorrhea is not a task for official health agencies alone, nor yet for physicians alone. It still is a task for the whole people.

The American Social Hygiene Association is the one national voluntary agency primarily concerned with the prevention and cure of the venereal diseases. It is an organization through which citizens everywhere have an opportunity to do their part in this task.

The Association has been and continues to be not merely a valuable, but an indispensable ally of health authorities and the medical profession in their battles against these diseases. As a member of the Board of Directors of the Association and as a public official, I long have been in a position to observe how important to official health activities is the work of this voluntary agency and its affiliated state and local groups.

The Association's work is particularly needed just now to sustain the new national interest in the dangers of syphilis and gonorrhea, to explain approved measures of control and encourage their practical application, and to aid in the correction of social and educational conditions which favor the spread of these diseases.

By the union of public and private efforts we can minimize syphilis and gonorrhea and the ill health, suffering and waste they cause.

THOMAS PARRAN.

Concerning "the Foundation Prize" of the American Association of Obstetricians, Gynecologists, and Abdominal Surgeons.

Huntington, West Virginia,
January 11, 1938.

To the Editor:—Since the announcement a few weeks ago of the award to be made by this Association there have been many inquiries received by the secretary.

I am enclosing to you a copy of the rules governing the awarding of this prize. I will appreciate it very much if you will run this in your journal as a news note. There may be members of the profession in your State who would be desirous of submitting a manuscript in this competition.

With my very kind regards, I am

Sincerely yours,
JAMES R. BLOSS, M.D.,
Secretary.

* * *

Rules governing the award of "The Foundation Prize" of the American Association of Obstetricians, Gynecologists, and Abdominal Surgeons:

1. The award, which shall be known as "The Foundation Prize," shall consist of $500.

2. Eligible contestants shall include only (*a*) interns, residents, or graduate students in obstetrics, gynecology, or abdominal surgery, and (*b*) physicians (with an M.D. degree) who are actively practicing or teaching obstetrics, gynecology, or abdominal surgery.

3. Manuscripts must be presented under a nom de plume, which shall in no way indicate the author's identity, to the secretary of the Association together with a sealed envelope bearing the nom de plume and containing a card showing the name and address of the contestant.

4. Manuscripts must be limited to 5,000 words, and must be typewritten in double-spacing on one side of the sheet. Ample margins should be provided. Illustrations should be limited to such as are required for a clear exposition of the thesis.

5. The successful thesis shall become the property of the Association, but this provision shall in no way interfere with publication of the communication in the journal of the author's choice. Unsuccessful contributions will be returned promptly to their authors.

6. All manuscripts entered in a given year must be in the hands of the secretary before June 1.

7. The award will be made at the annual meetings of the Association, at which time the successful contestant must appear in person to present his contribution as a part of the regular scientific program, in conformity with the rules of the Association. The successful contestant must meet all expenses incident to this presentation.

8. The president of the Association shall annually appoint a Committee on Award, which, under its own regulations shall determine the successful contestant and shall inform the secretary of his name and address at least two weeks before the annual meeting.

MEDICAL JURISPRUDENCE†

By HARTLEY F. PEART, ESQ.
San Francisco

The Legal Status of Physicians Under the Workmen's Compensation Act

Summary of Industrial Accident Legislation.—In 1918 the people of California adopted a constitutional amendment which created an Industrial Accident Commission and vested in the legislature plenary power to create and enforce a complete system of workmen's compensation. The constitutional amendment defines such a system as including "full provision for such medical, surgical, hospital and other remedial treatment as is requisite to cure and relieve from the effects of such injury." (Article XX, Section 21, Cal. Const.)

The Workmen's Compensation Act, adopted by the legislature pursuant to the constitutional provision, uses the following language with respect to medical and hospital treatment: "Where liability for compensation under this Act exists, such compensation shall be furnished or paid by the employer and be as provided in the following schedule: (*a*) Such medical, surgical, and hospital treatment, including nursing, medicine, medical and surgical supplies . . . as may reasonably be required to cure and relieve from the effects of the injury, *the same to be provided by the employer,* and in case of his neglect or refusal seasonably to do so, the employer to be liable for the reasonable expense incurred by or on behalf of the employee in providing the same; provided, that if the employee so requests the employer shall tender him one change of physician and shall nominate at least three additional practicing physicians competent to treat the particular case, or as many as may be available if three cannot reasonably be named, from whom the employee may choose; the employee shall also be entitled, in any serious case, upon request, to the services of a consulting physician to be provided by the employer; *all of said treatment to be at the expense of the employer.*" (Deering's General Laws, Act 4749, Section 9a.)

Section 16 of the Workmen's Compensation Act provides for medical examinations of employees upon written request of the employer, which examinations are to be made by a practicing physician and are to be paid for by the employer.

Thus it may be seen that, under the Workmen's Compensation Act, medical, surgical and hospital treatment must be made available to injured employees, and the services must be rendered by physicians *selected and paid for by the employer.* The Act authorizes employers to protect themselves against liability for compensation (which includes cash award and medical and surgical treatment

† Editor's Note.—This department of CALIFORNIA AND WESTERN MEDICINE, containing copy submitted by Hartley F. Peart, Esq., will contain excerpts from and syllabi of recent decisions and analyses of legal points and procedures of interest to the profession.

and hospital facilities) by taking out insurance in a private company authorized to write workmen's compensation insurance, or in the State Compensation Insurance Fund, an insurer operated by the State of California. Inasmuch as most all employers avail themselves of the right to secure insurance, it follows that in most instances payment for physician's services to injured employees is made by an insurance company for and on behalf of the employer under an insurance contract by which the insurance company agrees to assume the employer's liability under the Workmen's Compensation Act in return for stated premiums. Hence, although the Workmen's Compensation Act imposes the liability for payment of physician's services upon employers, as a matter of actual practice such payment is made by the insurance carriers for the employers.

Effect of Workmen's Compensation Constitutional Provisions and Statutes on Practice of Medicine—Corporate Practice.—At this point it should be made clear that the Workmen's Compensation Act is a statutory exception to the general rule that a corporation may not engage in the practice of medicine or surgery. The people of California, through their Constitution and the Workmen's Compensation Act, have determined that for the purpose of industrial injuries only, it is competent for a corporation, *i. e.,* an employer and its insurance carrier, or both, to select physicians for third persons, *i. e.,* injured employees, and to pay for the professional services of the physicians so selected. This is the practice of medicine or surgery by corporations, since corporations control the payment for professional services rendered to others, but it is not in this instance unlawful because of express constitutional and statutory provisions. It is, of course, in all *other* instances unlawful.

Right of Physicians to Compensation Where Employee Treated Was Hired in Another State.—If a physician renders professional services to an injured employee, and the employee does not seek an award of compensation from the Industrial Accident Commission, the physician cannot commence a proceeding before the Commission for compensation for medical services unless the injured employee is also a party to the proceeding. (*Pacific Employers Ins. Co.* vs. *French,* 212 Cal. 139; *Independence Ind. Co.* vs. *Industrial Acc. Comm.* 2 Cal. (2nd) 397.)

The most difficult problems with regard to the Workmen's Compensation Act arise from the fact that present-day commercial and business enterprises are nation-wide and even world-wide, so that employees are often employed in one state and work in another state. When an employee is employed, say, in State A to work in State B, and is injured while in State B, a question at once arises as to which state, A or B, has jurisdiction under its Workmen's Compensation Law. This problem is extremely important to physicians, and may be illustrated by reviewing the case of *Pacific Employers' Ins. Co.* vs. *Industrial Acc. Commission,* 95 Cal. Dec. 107, decided by the Supreme Court of California on January 31, 1938. The facts were these: One Tator, a chemical engineer, was employed in Massachusetts by a business concern, and several years later was sent to a branch plant of his employer located in Oakland, California, for the purpose of solving, if possible, a technical problem confronting the Oakland plant. His presence in Oakland was considered temporary by both his employer and himself. While in Oakland he was injured and medical services were rendered to him by several physicians. The insurance company carrying Tator's employer's workmen's compensation insurance in California refused to pay any compensation or to pay the physicians, on the ground that Tator was a *Massachusetts* employee and, hence, was only entitled to receive compensation in *Massachusetts* from the Massachusett's insurance carrier of Tator's employer. If the insurance company's position had been sustained, it would have meant that Tator's physicians would have had to proceed in Massachusetts to collect, if possible, their compensation. The California Supreme Court, however, held that it would be obnoxious to the public policy of this State to deny persons who have been injured in this State, although residents of another state, the right to apply for compensation, when to do so might require physicians and hospitals to go to another state to collect charges for medical care and treatment given to such persons. It was, therefore, decided that Tator was entitled to compensation and that his physicians were entitled to be paid in California.

This decision is so important to the medical profession that, at the risk of repetition, portions of the court's opinion will be quoted:

Upon the principles which have been stated and applied in these cases, Mr. Tator cannot recover compensation in California unless this State has a governmental interest in the controversy superior to that of Massachusetts. At the time of his injury, Mr. Tator was a resident of Massachusetts. He was employed there, and was subject to the direction of officers of the employer there located. His salary was paid to him in that state, and he had come to California only on a specific errand for his employer. Under these circumstances the interest of California, like that of New Hampshire in the Clapper case, *supra,* is only "casual" unless there are other facts upon which a governmental interest may be based. It is urged that this interest may be found in the medical and hospital expenses which were incurred in this State and had not been paid at the time of the hearing.

The modern view that the cost of industrial injuries is properly a part of the expense of production underlies all workmen's compensation laws. (*Western Ind. Co.* vs. *Pillsbury,* 170 Cal. 686.) The public has a direct interest in the results of industrial accident. When the injured employee had only a right of action for damages, he too often became an object of charity. Even under present laws the public bears some part of the expense of such accidents in addition to the amount which is added to the cost of manufacture. The public, therefore, is vitally concerned to see that adequate medical care is furnished to those injured.

This court has said: "As a practical matter, injured employees as a class will receive better and more willing medical service if remuneration for such services from an employer or insurance carrier is assured to doctors and hospitals than in instances may arise in which, if an employee neglects to file a claim for compensation, after the services have been rendered, such doctors and hospitals may be required to look only to the injured employee for compensation. It should be borne in mind that the medical, surgical and hospital treatment which is intended to be assured to injured employees as one of the items of their compensation by the Act, will be more certain to be furnished if doctors and hospitals are assured of certain remuneration for their services." (*Independence Indem. Co.* vs. *Indus. Acc. Com.,* 2 Cal. (2nd) 397, 404.)

The public policy of California upon this question has been clearly and positively stated in the Constitution, the Workmen's Compensation Law which was enacted pursuant to it, and the decisions of this court. It would be obnoxious to that policy to deny persons who have been injured in this State the right to apply for compensation when to do so might require physicians and hospitals to go to another state to collect charges for medical care and treatment given to such persons. Under these circumstances the governmental policy of California weighs more heavily in the scale of decision than the law of Massachusetts, and the conflict in laws must be resolved in favor of the state where the injury occurred.

The award is affirmed.

SPECIAL ARTICLES

SOME LOS ANGELES COUNTY HOSPITAL PROBLEMS: COMMENT*

Most members of the Los Angeles County Medical Association are aware that during the week just passed the newspapers have carried a series of reports referring to the Los Angeles County Hospital, founded on an editorial in the February OFFICIAL JOURNAL of the California Medical Association (on page 73), which in turn was based on an article in that issue (on page 97), contributed by your speaker.

It may be assumed, therefore, that the subject upon which further comment will now be made is not entirely new.

Some of the special issues involved concern matters such as the following:

The types of patients who are admitted to the County Hospital.

The bills which are rendered to them, after they leave the institution.

* Read by George H. Kress, M.D., Los Angeles, at the general meeting of the Los Angeles County Medical Association, on February 17, 1938.

For other comment on this subject, see February issue of CALIFORNIA AND WESTERN MEDICINE, on pages 73 and 97, and in this issue, on page 156.